

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | 8 | 03/15/01 |
| FORMALITY REVIEW | S.H. | 1085 | 5/20/01 |
| RESPONSE FORMALITY REVIEW | gph | 1030 | 7-26-01 |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) ... Canceled
 ÷ Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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730/01
7-26-01